PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

LICANT:

Eilaz Babaev

GROUP ART UNIT: 3737

SERIAL NO .:

09/774,145

FILED:

January 30, 2001

EXAMINER:

Shawna J. Shaw

Atty. Docket No. 1177-9

FOR:

0 2 2005

ULTRASONIC WOUND TREATMENT METHOD AND DEVICE USING STANDING WAVES

Mail Stop: Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

OTHER THAN SMALL ENTITY SMALL ENTITY (Col. 1) (Col. 2) (Col. 3) CLAIMS REMAINING HIGHEST NO. ADDIT. ADDIT. **PREVIOUSLY** PRESENT **AFTER** RATE FEE PAID FOR RATE FEE OR **EXTRA AMENDMENT** X 9 \$0 X 18 \$0 **TOTAL** 12 MINUS 30 = 0\$0 X 44 \$0 = 0X 88 INDEP. MINUS 4 ☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM \$0 X 150 X 300 OR TOTAL \$0 **TOTAL**

ADDIT. FEE \$ -0-

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Services first class mail, postpaid in an envelope, addressed to the: Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on January 31, 2005.

Dated: January 31, 2005

Adrienne Fagad

^{*} If the entry in Co. 1 is less than entry in Col. 2, write "0" in Col. 3.

^{**} If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For IN THIS SPACE is less than 3, enter 3.

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

[]	Please charge Deposit Account No. $\underline{50\text{-}2140}$ in the amount of $\$$ Two (2) copies of this sheet are enclosed.
[]	A check in the amount of \$ is enclosed.

[X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,

David M. Carter Reg. No. 30,949

Attorney for Applicant(s)

Carter, DeLuca, Farrell & Schmidt, LLP

445 Broad Hollow Road Suite 225 Melville, New York 11747 Tal: (631) 501-5700

Tel.: (631) 501-5700 Fax: (631) 501-3526

DMC/GL/af